



Committee report

Committee	HEALTH AND COMMUNITY WELLBEING SCRUTINY PANEL
Date	26 SEPTEMBER 2012
Title	ACTION PLAN ARISING FROM THE CARE QUALITY COMMISSION'S INSPECTION OF THE GOULDINGS

This report outlines the actions taken following the inspection of the Gouldings. .

Care planning

- new care planning paperwork in place which much better shows clients abilities, support needs and preferences
- updated and enhanced following feedback from the IWC Quality Assurance (QA) Team and in conjunction with health colleagues from the Intermediate Care Team
- members of staff have been have received instruction regarding the new care plans
- guidance pack in place for continued reference, including a check list of required contents for each care plan
- Community Reablement OT services have been involved in providing staff workshops on reablement and assessment and goal setting with clients
- duty managers review each care plan following the booking in of a client, signing and dating the review section
- an in-house policy is in place limiting planned admissions to four per day thus ensuring adequate time available to properly assess and plan each individual's care, whilst retaining capacity to receive emergency placements.
- the policy outlines that additional resources should be put in place should additional admissions be needed thereby ensuring that quality of care planning is not compromised.
- adjustments to rotas have created an overlap of staffing at peak periods to support the admission process and provide better continuity for the service user.

Medication

- The medication policy has been completely reviewed and updated which included an overhaul of the documentation used and audit process.
- An updated Medicines Administration Record (MAR) is in place including self administration risk assessment where required.

- All members of staff responsible for medication administration have been made aware of the new policies and procedures and have signed documentation to this effect.
- All members of staff responsible for administering medication have achieved a level 2 certificate Understanding the Safe Handling of Medicines (delivered by the IW College) including all aspects from receipt of medication, storage, administration and return of unused medication.
- The Medicines Management Team reviewed and found new policy, procedures and audit process (below) to be compliant with current legislation and in line with best practice

Management of care planning and medication (audit)

- A robust review and audit system has been put in place to ensure that care plans are complete and up to date. Duty managers review sample files and the manager audits this process on a daily basis. Both the duty manager's reviews and manager's audits are recorded, dated and signed to provide evidence of an ongoing audit and review process.
- Similarly, a robust review and audit system has been put in place to ensure that medication practice is in line with the new policy and that continues to be so. Duty managers review client medication regularly and the manager audits the whole process. A check list for audit purposes is also available.

Following our own QA review and monthly proprietor visits, there is a high level of confidence that the follow up inspection will find The Gouldings to be fully compliant.

APPENDICES ATTACHED

[Appendix A](http://www.cqc.org.uk/directory/1-116968365) – Care Quality Commission review of compliance report published May 2012
<http://www.cqc.org.uk/directory/1-116968365>

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